

2/4
9/14/00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>[Signature]</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	11	<i>[Signature]</i>
FORMALITY REVIEW	<i>[Signature]</i>	JC 645	9-12-09
RESPONSE FORMALITY REVIEW	LH	60150	12-14-0

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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